1164172 **OMB APPROVAL** FORM D OMB Number:.....3235-0076 UNITED STATES Expires: April 30, 2008 SECURITIES AND EXCHANGE COMMISSION Estimated average burden Washington, D.C. 20549 hours per form16.00 RECEIVED FORM D **SEC USE ONLY** NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, Prefix Serial 3 2007 JUL I SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION **DATE RECEIVED** 160 Name of Offering (check if this is an amendment and name has changed, and indicate change.) Issuance of Units of Beneficial Interests of Wells Fargo Multi-Strategy 50 Hedge Fund, LLC Filing Under (Check box(es) that apply): □ Rule 504 ☐ Section 4(6) □ ULOE ☐ Rule 505 Rule 506 ■ New Filing Type of Filing: Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer check if this is an amendment and name has changed, and indicate change. Wells Fargo Multi-Strategy 50 Hedge Fund, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (415) 371-3053 c/o Wells Fargo Alternative Asset Management, I.LC 333 Market Street, 29th Floor, San Francisco, CA (Number and Street, Six State, Zip Code) Address of Principal Offices Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business: **Private Investment Company** JUL 19 200 THOMSON Type of Business Organization ☐ limited partnership, already for FINANCIAL corporation □ other (please specify) **Limited Liability Company** business trust ☐ limited partnership, to be formed Year Month Actual or Estimated Date of Incorporation or Organization: n 8 0 Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

D

Ε

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIFICATION DATA	4							
 Each promoter of the seach beneficial owner. Each executive office. 	 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner						
Full Name (Last name first, if individual): Wells Fargo Alternative Asset Management, LLC											
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 333 Market Street,	29 th Floor, San F	rancisco, CA 94105						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner						
Full Name (Last name first,	if individual):	Alden, Eileen									
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 333 Market Street,	29 th Floor, San F	rancisco, CA 94105						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first,	if individual):	Welker, Jay Scott									
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 333 Market Street,	29 th Floor, San F	rancisco, CA 94105						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first,	if individual):	Rauchle, Daniel J.									
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 333 Market Street,	29 th Floor, San F	rancisco, CA 94105						
Check Box(es) that Apply:	Promoter	Eleneficial Owner		Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Junkans, Dean Allen									
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 433 North Camden	, Suite 1200, Bev	erley Hills, CA 90210						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	Samet, R. Scott									
Business or Residence Add	ress (Number and	Street, City, State, Zip Code): 333 Market Street,	29 th Floor, San Fi	rancisco, CA 94105						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):										
Business or Residence Add	ess (Number and	Street, City, State, Zip Code):								
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner						
Full Name (Last name first, i	f individual):	,,									
Business or Residence Addi	ess (Number and	Street, City, State, Zip Code):								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B.	INFORM	NOITAN	ABOUT	OFFER	ING			
1. Has	s the issue	er sold, or o	does the is	suer inten			redited inve				,	☐ Yes	⊠ No
2. Wh	at is the m	inimum in	voetment t	hat will be		, ,			-			¢=	nn nnn**
Z. ¥¥11	iat is trie ii	III III II QITI II I	vesimeni	nat will be	accepted	nom any i	ii luiviuuai ?						00,000** ay be waived
													•
	es the offe	•	•	•	•							Yes	: □ No
any offe and ass	ter the info commissioning. If a lad on the terminal of terminal of the terminal of terminal of terminal of te	ion or simi person to l state or st ersons of s	lar remune be listed is ates, list the such a brok	eration for an associ ne name of cer or deal	solicitation ated perso f the broke er, you ma	of purcha on or agen or or dealer by set forth	sers in cor it of a brok r. If more in the inform	nnection w er or deale than five (§	rith sales o er registere 5) persons	f securities d with the to be liste	s in the SEC d are		
Full Nan	ne (Last na	ame first, if	f individual) We	lls Fargo	Investme	nts, LLC						
Busines	s or Reside	ence Addr	ess (Numt	per and St	reet, City,	State, Zip	Code)	550 Cali	fornia Str	eet, 6 th Fl	oor, San I	Francisco, (CA 94104
Name of	f Associate	ed Broker	or Dealer										
	n Which Peneck "All Si							,			-		
[AL]		[AZ]					□ (DE)			☐ [GA]	[HI]	□ [ID]	G , o.a
	□ [IN]	□ [IA]	[KS]	[KY]	[LA]	☐ [ME]	[MD]	☐ (MA)	[MI]	☐ (MN)	☐ (MS)	[MO]	
☐ [MT]	□ [NE]	□ (NV)	□ [NH]	□ [NJ]	[MM]	□ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ (OK)	□ [OR]	□ [PA]	
□ [RI]	☐ [SC]	□ [SD]	□ [TN]	□ [TX]			□ [VA]	□ [WA]	□ (wv)	□ [WI]	□ [WY]	□ (PR)	
Full Nam	ne (Last na	ıme first, if	individual)									
Busines	s or Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name of	Associate	d Broker o	or Dealer						<u></u>		.,		
	n Which Pe												☐ All States
□ [AL]					•		□ [DE]	□ [DC]	□ [FL]	☐ [GA]	☐ [HI]	[OI]	_
	[IN]	[Ai]	□ [KS]	□ [KY]	[LA]	☐ [ME]	[MD]	□ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
[MT]	□ [NE]	□ [NV]	□ [NH]	[NJ]	[MM]	□ [NY]		□ [ND]	□ (OH)		□ [OR]	□ (PA)	
[RI]	☐ [SC]	☐ [SD]	[מד]			[VT]	□ [VA]	[WA]	[WV]	[WI]		□ (PR)	
Full Nam	ne (Last na	me first, if	individual)									
Business	s or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Name of	Associate	d Broker o	or Dealer										,
	Which Pe leck "All St												☐ All States
☐ [AL]					-		□ [DE]			☐ [GA]	☐ [HI]	□ [ID]	
	□ [IN]	□ [IA]	[KS]	□ [KY]	[L.A]	[ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
☐ [MT]	□ [NE]	□ [NV]	□ [NH]	□ [NJ]	[NM]	[NY]	☐ [NC]	□ [ND]	□ (OH)		□ [OR]	□ [PA]	
□ (RI)	[SC]	☐ [SD]	□ [TN]	□ [TX]	(UT)		□ [VA]	[WA]	[WV]	[WI]	[WY]	□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Offering Price

	already exchanged. Type of Security		Aggregate Offering Price		A	mount Already Sold
		•	_			
	Debt			<u> </u>		0
	Equity	\$		<u> </u>	i	0
	☐ Common ☐ Preferred	_				
	Convertible Securities (including warrants)			0 \$		00
	Partnership Interests			0 \$		0
	Other (Specify) Units of Beneficial Interest)	<u>\$</u>	100,000,0	900\$		49,902,316
	Total Answer also in Appendix, Column 3, if filing under ULOE	\$	100,000,0	900\$		49,902,316
o ir	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, ndicate the number of persons who have purchased securities and the aggregate dollar amount of heir purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors		72	<u> </u>		49,902,316
	Non-accredited Investors		0	\$		0
				<u> </u>		
S	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the					N/A
s	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1.		N/A		,	Dollar Amount
s	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering		N/A Types of Security	<u> </u>		Dollar Amount Sold
s	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security	<u> </u>		Dollar Amount Sold N/A
s	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security N/A			Dollar Amount Sold N/A N/A
s	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505 Regulation A		Types of Security N/A N/A			Dollar Amount Sold N/A N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505 Regulation A Total		Types of Security N/A			Dollar Amount Sold N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505 Regulation A Total Total L. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is		Types of Security N/A N/A N/A		C	Dollar Amount Sold N/A N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total Total Total Termish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		Types of Security N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$	С	Dollar Amount Sold N/A N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security N/A N/A N/A	\$ \$ \$ \$ \$ \$	C	Dollar Amount Sold N/A N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505 Regulation A Rule 504 Total Total L. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs.		Types of Security N/A N/A N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$		Dollar Amount Sold N/A N/A N/A O
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security N/A N/A N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Dollar Amount Sold N/A N/A N/A N/A
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Oollar Amount Sold N/A N/A N/A N/A O 133,998
s. s. fi	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the irst sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505		Types of Security N/A N/A N/A N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Oollar Amount Sold N/A N/A N/A N/A 0 0 133,998 0

Qι	Enter the difference between the aggregate offer testion 1 and total expenses fumished in response djusted gross proceeds to the issuer."	to Part C-Question 4.a. This different	ence is the		<u>\$</u>	99,480,127		
us es	dicate below the amount of the adjusted gross proced for each of the purposes shown. If the amount fit timate and check the box to the left of the estimate, a adjusted gross proceeds to the issuer set forth in the adjusted gross proceeds to the increase and the set forth in the adjusted gross proceeds to the increase and the set forth in the se	or any purpose is not known, furnish The total of the payments listed m	h an ust equal	Payments to Officers, Directors & Affiliates		Payments to Others		
	Salaries and fees			\$	🗆	\$		
	Purchase of real estate			\$		\$		
	Purchase, rental or leasing and installation of r	machinery and equipment		\$		\$		
	Construction or leasing of plant buildings and t	acilities		\$		\$		
	Acquisition of other businesses (including the		_					
	offering that may be used in exchange for the pursuant to a merger	assets or securities of another issue	er 🗆	\$		\$		
	Repayment of indebtedness			\$		\$		
	Working capital			\$	🗵	\$ 99,480,127		
	Other (specify):			\$		\$		
				\$		\$		
	Column Totals			\$	U	\$ 99,480,127		
	Total payments Listed (column totals added)),127		
	Total paymonts Listed (column totals added)				· 33,400	<u> </u>		
		D. FEDERAL SIGNATU	RE			•		
onstit	suer has duly caused this notice to be signed by the utes an undertaking by the issuer to furnish to the lissuer to any non-accredited investor pursuant to p	J.S. Securities and Exchange Comr	on. If this n mission, upo	otice is filed under R on written request of	ule 505, the	e following signature e information furnished		
	(Print or Type)	Signature	\bigcirc	Λ	Date			
/ells	Fargo Multi-Strategy 50 Hedge Fund, LLC	14.00	3	/	July l	2, 2007		
	of Signer (Print or Type) ott Samet	Title of Signer (Print or Type) Vice President of Wells Fargo Alternative Asset Management, LLC, its Managing Member						
	At Samet	vice President of Wells Parg	o Alternativ	e Asset Wanageme	ant, LLC, it	is wanaging wember		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 prese provisions of such rule?	ntly subject to any of the disqualification	
	See A	opendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to ful (17 CFR 239.500) at such times as required by	rnish to any state administrator of any state in which t state law.	his notice is filed a notice on Form D
3.	The undersigned issuer hereby undertakes to fu	rnish to the state administrators, upon written request	, information furnished by the issuer to offerees.
4.	,	er is familiar with the conditions that must be satisfied ice is filed and understands that the issuer claiming the satisfied.	•
	uer has read this notification and knows the conterzed person.	nts to be true and has duly caused this notice to be sig	ned on its behalf by the undersigned duly
	(Print or Type) Fargo Multi-Strategy 50 Hedge Fund, LLC	Signature	Date July 12, 2007
Name o	of Signer (Print or Type)	Title of Signer (Print or Type)	

Vice President of Wells Fargo Alternative Asset Management, LLC, its Managing Member

E. STATE SIGNATURE

Instruction:

R. Scott Samet

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	•			API	PENDIX					
					· · · · · · · · · · · · · · · · · · ·	4		т		
1	1	2	3		5	•				
	to non-a- investors	Type of security Intend to sell and aggregate to non-accredited offering price Type of investor and investors in State (Part B – Item 1) (Part C – Item 1) (Part C – Item 2)								
State	Yes	No		Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL				-						
AK										
AZ		X	\$100,000,000	2	\$876,614	0	\$0		х	
AR										
CA		Х	\$100,000,000	35	\$27,969,735	0	\$0		х	
СО		Х	\$100,000,000	6	\$5,201,061	0	\$0		Х	
СТ										
DE		Х	\$100,000,000	2	\$589,948	0	\$0		х	
DC										
FL				_						
GA		Х	\$100,000,000	1	\$498,575	0	\$0		х	
HI										
ID	-	Х	\$100,000,000	1	\$306,912	0	\$0		х	
ı		Х	\$100,000,000	1	\$673,951	0	\$0		X	
N										
IA		Х	\$100,000,000	1	\$245,014	0	\$0		Х	
KS										
KY										
LA										
ME										
MD										
MA										
MI										
MN	i	х	\$100,000,000	8	\$7,638,385	0	\$0		х	
MS										
МО										
MT				1 - 1						
NE		Х	\$100,000,000	4	\$1,687,014	0	\$0		х	
NV		Х	\$100,000,000	1	\$543,611	0	\$0		×	
NH					··········					
NJ			!							
NM										

	• -			API	PENDIX	,+					
		_				70	···				
1	:	2	3			4		5	5		
	to non-a	I to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C – Item 1)	Disquunder S (if ye Type of investor and expla amount purchased in State waiver (Part C – Item 2) Disquunder S expla varies (Part E							
State	Yes	No	Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NY	,	х	\$100,000,000	1	\$500,809	0	\$0		Х		
NC											
ND		Х	\$100,000,000	1	\$257,924	0	\$0		х		
ОН											
ок											
OR											
PA											
RI			_								
sc											
SD					***						
TN											
TX		Х	\$100,000,000	5	\$1,823,908	0	\$0		x		
UT					···						
VT											
VA											
WA											
wv								ļ			
WI		X	\$100,000,000	1	\$1,108,738	0	\$0		x		
WY		Х	\$100,000,000	2	\$1,062,075	0	\$0		х		
PR											

